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PHONE NO.

DATE October 15, 2008

This is the first page of 24

FROM William B. Vass

LAWYER NO 1217 FILE NO 50319-20

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MESSAGE

**Re: U.S. Application No. 10/709,298**  
**Filed: April 27, 2004**  
**First Named Inventor: Simpson, Todd Garrett**

**Attached:** Transmittal Form  
Request for Continued Examination  
Fee Transmittal Form  
Petition for Extension of Time  
Credit Card Payment Form  
Amendment/Reply

WSLegal000850012173539886v1

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PTO/SB/17 (10-08)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).

# **FEE TRANSMITTAL**

## **For FY 2009**

☒ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)1226.00  
~~1226.00~~**Complete If Known**

Application Number	09/709,298
Filing Date	27-April-2004
First Named Inventor	SIMPSON, Todd Garrett
Examiner Name	AIRAPETIAN, Mila
Art Unit	3625
Attorney Docket No.	50319-20/wbv

**METHOD OF PAYMENT** (check all that apply)
☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
☒ Deposit Account Deposit Account Number: 02-2057 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
52	26

Each independent claim over 3 (including Reissues)

220	110
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Multiple dependent claims

390	195
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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52 HP	- 20 or HP =	6	x 26 =	156.00
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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3 HP	- 3 or HP =	1	x 110 =	110.00
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HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number) x		
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**4. OTHER FEE(S)**

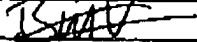
Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Petition for Extension of Time (3rd Month) + Excess claims fees + RCE

1226.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	36,416	Telephone	416-863-1200
Name (Print/Type)	William B. Vass, Bennett Jones LLP			Date	October 15, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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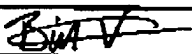
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10709,298
	Filing Date	27-April-2004
	First Named Inventor	SIMPSON, Todd Garrett
	Art Unit	3625
	Examiner Name	AIRAPETIAN, Mila
Total Number of Pages in This Submission	Attorney Docket Number	50319-20/wbv

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Bennett Jones LLP, Customer Number 64691		
Signature			
Printed name	William B. Vass		
Date	October 15, 2008	Reg. No.	36416

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	William B. Vass, Regn. No. 36,416	Date	October 15, 2008

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